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SANTA ROSA,	CA 95403			Kimb	ed/ Melvin	(Depositor's name)
				4	((Signature)
			hance	April 20,7	000	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	TORNEY DOCKET NO.	CONFIRMATION NO.
10/773,836 02/05/2004 .		J. Christopher Flaherty	rty P2015 DIV I 8515			
TITLE OF INVENTION: STABILIZED TISSUE PENETRATING CATHETERS						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	E TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/25/2010
EXAMI	2000	ART UNIT	CLASS-SUBCLASS		,,,,,,,,	
KISH, JAMES M		3737	600-407000	3		
1. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the p	atent front page, list	***************************************	MOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOCOC
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Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.			
3. ASSIGNEE NAME AN	ID RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or ty	ж)	***************************************	***************************************
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Medtronic Vascular, Inc. Santa Rosa, California USA						
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 📈 Corporation or other private group entity 🚨 Government						
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Authorized Signature	WWM	LIEUM	and the same of th	Date 4/	19/2010)
Typed or printed name	William 2	. Haynes		Registration No.	10,151	
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